Differences in the Roles between Care Coordinators, Child/Adolescent Family Assistant and Family Support Worker

Family Support Worker (FSW)	Child/Adolescent Family Assistant (CAFA)	Care Cordinator (CC) or Community Support Specialist (CSS)	Differences
Is to assist the family by educating and empowering them to advocate for their child/children. By using the SOC Values and Guiding principals, education laws, policies and procedures, the FSW will develop goals with which the family agrees. Although the goals and objectives are a way to address current needs, it must also capitalize on opportunities to teach self-advocacy to the family.	Child/adolescent family assistant focuses on the child and the develpment of home and community living skills, communication and socialization and identifying and arranging appropriate community services.	Is a community based mental health professional. This individual serves as a liaison between children/families and systems, and provides a wide range of services, de- pending on the needs and expectations of each child and family.	FSW is a family member/peer resource CC /CSS is a community based mental health professional . FSW supports the family voice in being heard. CC/CSS is a liaison between systems .Child /Adolescent Family Assistant is the support arm for the child.
 Determine level of understanding of their child's diagnosis and situation. Engage the family to actively participate in the child and family team meetings by helping them pre-determine their roles and the roles of natural supports they may have. Assist the family in identifying their natural supports or surrogate supports. Help the family identify their child's strengths and the strengths of the family. Support the family at child and family team meetings and model good advocacy skills (non clinical goals). Trouble shoot and problem-solve when strategies are not working. Connect families to community resources Documentation 	1. Model appropriate behaviors and coping skills for the child. 2. Expose child to new activities encouraging positive choices, promoting self esteem supporting academic achievement and develop problem solving skills regarding home and school. 3. Teach appropriate social skills through hands on experiences. 4. Mentoring appropriate social interactions with the child/adolescent or resolving conflict with peers.	 Serves as a specialist to systems. Provide TCM and community support services (monitoring and linking). Collaborate with other systems to advocate for the mental health needs of the child/family monitor participation and progress in treatment programs. Maintain contact with children who are hospitalized. Provide crisis intervention and critical incident stress management. Provide parenting education (follow respective service Policy Manuals). Provide skill building training (follow respective service Policy Manuals) Collaborate with families and systems to develop individualized child and family plans (clinical goals). Documentation 	 Family member vs professional - non clinical vs. clincial. FSWs help the family identify strengths and prepare for meetings - CC/CSS facilitate appropriate system partners to be at the table. FSPs help to ascertain natural and surrogate supports and CC/CSSs help to locate professional resources and break down the barriers to getting those services. FSWs share in the knowledge of the challenges of parenting a child with SED (empathy) and CC/CSSs provide opportunities for professional training and consultation when necessary. The difference between FSWs and CAFAs is most apparent in that the CAFAs has primary interaction with the child and the FSWs role is to support the parent and family as a whole. The difference between FSW and the CAFA role is that the FSW helps the family find and empower their own voice to become a part of system of care, whereas the CAFAs role is supporting and teaching various social skills to child.

P-arent a support to the parent that has 1st hand knowledge of system issues and challenges

A-dvocate

R-esource for parent and assists in finding community resources

T-rainer trains parents and community partner regarding values and principles of System of Care

N-eogotiator with system partners and others to get families needs met

E-ducator educating parents about systems and strategies to get their needs met

R-ecruiter recruiting parents to become involved in the broader community in changing the system, i.e. volunteering on local boards, state board, etc.